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LEVEL OF SATISFACTION AMONG FOOD PANTRY CLIENTS,
STAFF/VOLUNTEERS, AND DIRECTORS AND ITS ASSOCIATION WITH
CLIENT CHOICE IN FOOD PANTRY LAYOUTS

BY

MYRANDA MARIE DUNMIRE

A thesis submitted in partial fulfillment of the requirements for the

Master of Science

Major in Exercise and Nutritional Sciences

Nutritional Science Specialization

South Dakota State University

2019

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STAFF/VOLUNTEERS, AND DIRECTORS AND ITS ASSOCIATION WITH
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Myranda Marie Dunmire

This thesis is approved as a creditable and independent investigation by a candidate for the Master of Science in Exercise and Nutritional Sciences degree and is acceptable for meeting the thesis requirements for this degree. Acceptance of this thesis does not imply that the conclusions reached by the candidate are necessarily the conclusions of the major department.

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This document contains my master thesis for my Master of Science in Exercise and Nutritional Sciences at South Dakota State University. It describes the results of my research on the perception levels of food pantry clients, staff and volunteers, and food pantry directors on the basis of food pantry layout changes. Finishing this research project means a lot to me and the completion of this undertaking could not have been possible without the participation and assistance of so many individuals. Their contributions and vast knowledge are sincerely appreciated and gratefully acknowledged. My deep indebtedness goes first to my advisor and Professor Lacey McCormack, PhD, MPH, RD, LN, EP-C, who expertly guided me through my graduate education and who shared in my enthusiasm and excitement on this project. Her dedication and motivation were invaluable help throughout the course of this research work along with her ample skills and knowledge. My appreciation also extends Ms. Suzanne Stluka; her immense knowledge and understanding of the project have been especially valuable.

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ABBREVIATIONS

DGA	Dietary Guidelines for Americans
FPC	Food Policy Council
HEI	Healthy Eating Index
IRB	Institutional Review Board
MDE	Minimum Day's Equivalent
SES	Socioeconomic Status
SNAP	Supplemental Nutrition Assistance Program
USDA	United States Department of Agriculture
VFF	Voices for Food
WIC	Women, Infant, and Children

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ABSTRACT

LEVEL OF SATISFACTION AMONG FOOD PANTRY CLIENTELE AND ITS
ASSOCIATION WITH CLIENT CHOICE IN FOOD PANTRY LAYOUTS

MYRANDA MARIE DUNMIRE

2019

Objectives: Food insecurity is an issue in rural communities, particularly among food pantry clients. Food pantries may not provide clients with the opportunity to choose their own foods (client choice), and instead may just give a set amount and type of foods. Client choice is important in regards to client health status as well as perceptions of autonomy and quality of life. Although client choice can be promoted in food pantries, it may be difficult to grasp the process of food pantry transitioning and how well changes such as these may be perceived by clients or food pantry personnel. We sought to determine the association between client choice within pantries and perceptions of food pantry client, staff/volunteer, and director in six Midwestern states. *Methods:* Degree of client choice within the pantry was determined using a study-developed MyChoice scorecard, which could range in score from 0 to 42. Change in MyChoice score from baseline to post-intervention (follow-up) was calculated. 191 rural food pantry clients completed baseline and follow-up data collection and were surveyed on their levels of satisfaction with amount, variety and choice of foods received from their food pantry. Differences in pre/post satisfaction scores were calculated and linear regression was used to determine the relationship between change in satisfaction score and change in MyChoice score while controlling for intervention status, sex and age. Additionally, 101 food pantry staff and volunteers and 41 food pantry directors were surveyed on their

perceptions related to how food was displayed and distributed. Perception responses were dichotomized and logistic regression was used to determine the relationship between these outcomes and MyChoice score while controlling for intervention status, sex and age. Odds ratios and p-values are reported. *Results:* MyChoice observation scores improved over the course of the intervention (8.4 ± 8.1). Overall changes within food pantries, as indicated by increases in choice scores, were positively perceived by pantry clients, staff/volunteers, and directors. Increases in client satisfaction with increases in MyChoice score were seen for amount ($p=.041$) and variety ($p=.008$) but not choice ($p=.077$). For pantry staff/volunteers, odds of reporting changes to the way foods were displayed and changes to the way foods were given out increased with increasing MyChoice score (both OR 1.2, $p<.000$). Odds of food pantry directors reporting distributing more of a certain food compared to a year ago (versus less or about the same) were higher for fruits and vegetables (OR=1.2, $p<0.01$), grains (OR=1.2, $p<0.01$), dairy (OR=1.4, $p<0.02$), and protein (OR=1.3, $p<0.01$). Food pantry directors did not report a significant change in the way foods were displayed or given out. *Discussion and Conclusion:* Satisfaction among pantry clients, staff/volunteers, and directors is not negatively impacted by the switch from less choice to more choice in food pantries, so this should not be a discouragement in making changes to improve client choice.

Chapter 1 Introduction

Consumption of healthy foods can be a perplexing task for individuals and their families if they do not have easy access to specific resources, i.e. grocery stores and farmers markets. Factors that can inhibit such consumption do not always fall on an individual's shoulders per se; achieving aspects of a healthy diet can be a strenuous task if individuals are classified as food insecure. Food insecurity is defined as the shortfall of consistent access to healthy foods¹. With uncertainty of where food can be found, individuals are left to seek food from publicly available resources, which can include, but are not limited to, food pantries.

Food pantries are facilities which provide emergency foods to those who seek it. Food pantries differ from food banks in the aspect of food pantries being more so responsible for aiding to individuals themselves while food banks are the responsible for providing food for the pantries.² However, quality and quantity of foods provided to food pantries are dependent on donations from farmers, retailers, food banks, local patrons, and the USDA. Food pantries function by receiving these donations in multiple forms (perishables and non-perishables) and distribute them to pantry clientele.³ The clientele that visit these facilities can range in diversity; it must be recognized though that this can regulate what clientele choose to consume.

Chapter 2 Literature Review

Diet Quality of Food Pantry Clients Eat

Simmet et. al³ completed an exhaustive literature review to examine and summarize dietary quality of food pantry users. Inclusion criteria for studies included whether they reported on socioeconomically disadvantaged adults (≥ 18 years old), whether they resided in high-income countries, and if they had used a food bank or food pantry at least once in the previous 12 months. Studies were excluded if they were conducted outside high-income countries or published before 1980. Studies were also excluded based on length of time (providing foods to individuals for a short time (study duration < 6 months) because nutritional status may not reflect the average of any pantry user long term.

Majority of studies referenced in this review elaborated on the poor nutritional quality that food pantry users have. Five studies reporting on energy indicated that mean group energy intake was less than the recommended amount delineated by the Food and Agriculture Organization of the United Nations for energy intake. All studies found mean intake of fruits and vegetables and dairy products to be below recommendations but mean intake of meat and alternatives to be within recommendations. It appears that food pantry clients are not receiving the recommendation amounts of specific foods that are required for healthy diets, indicating a need for this to be addressed through venues that provide food.

Food Pantry Client Selections and Preferences

Hoisington et. al.⁴ explored the food selections of food pantry clientele by grouping foods together using the 2005 Dietary Guidelines for Americans (DGA) and MyPyramid. Each food item was assigned to either one of the five MyPyramid groups (Grains, Fruit, Vegetables, Milk, and Meat/Beans) or one of four additional groups (Variety, Condiments, Discretionary, and Combination). Majority of clientele within this study selected foods categorized into the MyPyramid groups (66%) compared to the other groups (34%). Although foods from the MyPyramid group were selected more than any other group, the smallest proportion of foods distributed within this group included fruits and milk. Clients were also apt to select non-perishables such as condiments, baking essentials, and convenience meals. These products were discussed as helpful in creating homemade meals or enhancing meal preparations; such food choices aid in pantry clientele's abilities to stretch limited food budgets.

Campbell et. al.⁵ observed overall food preferences of food pantry clientele. This study included both urban and rural food pantries (55% urban and 45% rural); providing data on different pantries in their given locations allowed for comparisons. A questionnaire was given to pantry clients to collect preferential data, and the importance of having access to specific foods was further assessed. The availability of nutritious foods was listed as important by clients when it came to considered selections (98%); 94% reported that taste was also a very important factor in food selection. The highest mean rank for food preference was found to be for meat/poultry/fish (clients preferred to receive these items more than any other on the list), followed by vegetables and fruits respectively. Candy, soda, and snacks were the items least preferred to be received at a

food pantry. When comparing rural versus urban pantries, they both expressed similar preferences.

Akobundu et al.⁶ investigated what is offered to food pantry clients by way of the inventories. Food pantry clientele within Massachusetts were interviewed about their food selections after visiting designated food pantries (n=41); foods were categorized by brand name, size and amount, and the number of food group servings. Foods were categorized into different groups: fats/sweets group, bread/cereal/rice, fruits, vegetables, meats, and dairy. The results showed that the food groups that were offered in the smallest quantity to clientele were fruits (food group serving= 5.6 ± 6.2) and dairy groups (serving per client= 6.1 ± 5.6), while food group servings for other categories were higher: fats/sweets (49.9 ± 52.4), bread/cereal (43.0 ± 28.2), vegetables (15.5 ± 9.8), and meats (11.4 ± 8.4).

Akobundu et. al.⁶ also investigated the length at which foods can last clients. Food groups that tended to have a longer shelf-life and selected more frequently by food pantry clients were the bread groups (approximately 7 days). The subsequent food groups are the vegetable, meat, poultry, fish, dry beans, eggs, and nuts, and they would last approximately 5 days. The foods from the fruit and dairy groups would last approximately 3 days, the least amount of time. Pantry foods were also found to have large nutritional qualities in folate, iron, fiber, and protein, but lower nutritional densities in calcium, vitamin C, and vitamin A. Clientele selection can partly be attributed to shelf-life of specific foods.

Wilson et. al.⁷ brought to light how and possibly why pantry clientele choose the foods they do. To determine what influenced the foods pantry clients would choose,

designated dessert items within a New York food pantry had certain ordering and packaging styles. Order involved placing desserts in the back (end of the dessert line) or in the front (beginning of the dessert line); packaging styles involved leaving desserts in the original packaging (boxed) and repackaged desserts in clear bags (unboxed). The products that were placed up front and in the original packaging had significantly higher odds of selection compared to the others (OR=5.2, $p<0.05$). The study authors indicated that putting foods at the beginning of the line may make cognitive decision making easier on clients and keeping foods in the original packaging may help decrease or eliminate the stigma of receiving the products from a food pantry.

The same form of study was conducted by Wansink et. al.,⁸ healthy whole grain cereals were placed in separate locations from their unhealthy counterparts within grocery stores. The purpose of the study was to enact an overall change in healthy choice selections from pantry clientele. The criteria for relocation of the healthy cereal was either with the unhealthy cereals or ahead of/separate from the unhealthy cereals. Results showed that when the healthier cereals were placed separate from their competition, self-reported selection of healthier cereals increased from 8.4% to 32%.

Food Pantry Choice

Martin et. al.⁹ discuss the importance of food pantry choice versus traditional style pantries and its effects on clients. Traditional food pantries encompass a layout in which prepared boxes or bags of predetermined food types and amount are distributed to food pantry clients., while food pantry client-choice layouts provide a more grocery store-like display in which clients can browse through food options and make their own selections.

It is pertinent to acknowledge the importance of client choice layouts versus traditional because the impact on overall health status can be affected. Client choice layouts within food pantries can allow pantry clients the opportunity to select food products in which they desire as opposed to foods selected for them. A key point to note, according to Martin⁹, is that client choice pantries help to instill dignity and recognize personal and cultural preferences among food pantry participants.

Another study conducted by Byker Shanks, C.¹⁰, explains that changing food pantry environments as well as other factors can make a difference; in fact, simultaneously changing food pantry layouts and addressing clientele's self-efficacy (hands on experiences with food selection and preparation) can make more nutritious foods more accessible and desirable. With this in mind, changes to improve overall pantry distribution methods may be implemented without criticism from clients, and this also can ensure no effect on pantry clients' access to foods.

Choice may also play a role in alleviating food waste. Food pantry clients may not always have the ample appliances for proper food storage and/or preparation. Foods that require specific storage and preparation procedures (i.e. fresh meats or dairy products) may not be well accepted by pantry clients if they do not have the means to hold them. Choice can help alleviate those issues and help provide clients with greater satisfaction levels.

According to Remley, D.¹¹ traditional style food pantries may further the complications of chronic diseases. Provided foods within traditional food pantries may be of low desire or nutrient content for clientele, depending on available resources. There is also the issue of unfamiliar foods to clients, and specific foods within a food pantry may

be restrictive for a specific chronic disease. Restrictions in client-choice can be an issue because if clients desire or need specific foods within their diet and are not offered in ample quantities, it may lead to further complications (i.e. development or worsening of chronic diseases).

To increase choice in pantries, Martin⁹ developed an innovative food pantry collaborative called Freshplace. Freshplace is a university-community partnership food pantry in which clients are considered members and are guided by appointments (rather than stand in line) to co-shop with volunteers trained to facilitate nutrition education as well as conduct needs assessments and provide supportive coaching. Freshplace is a program that provides not only client choice but aids in the process of improving the members' lifestyles and quality of life. Results showed Freshplace food security scores increased by 1.64 within a three-month period, compared to a control pantry (food security score change=0.65). Fruit, vegetable, and fiber scores for Freshplace increased by 1.90 compared to a control pantry in which scores decreased over a three-month period (-1.40). Overall, the implementation of Freshplace was a success in this study.

Martin, et. al.¹² also discuss the Freshplace intervention and its effects on client self-efficacy for food security. The Freshplace intervention decreased very low food security (VLFS) and improved self-efficacy among members. This study investigated comparative factors between traditional pantry clients and Freshplace pantry clients; those who visited Freshplace had larger change scores in food security scores (1.6 vs. 0.7 points $p < .01$), and fruit and vegetable intake (1.9 vs. -1.4 points $p < .01$). Based on these outcomes, food pantries are encouraged to adopt strategies for boosting self-efficacy,

such as serving food in a client-choice format, offering motivational interviewing, and providing targeted referral services.

The pathway towards incorporating more client choice into food pantries can start with the pantry's distribution layouts. Remley, et. al.¹³ also touches on the transitioning of traditional pantry layouts into choice pantry layouts. The Rainbow of Choice Food Pantry Model was developed to empower its users to make mindful choices regarding their own diet; the model is set up so that participants can select their own foods, but according to provided shopping cards. These cards contain groups of foods categorized by MyPlate and are color coded per each food group (i.e. fruit = red). Participants are then able to choose their preference foods from shelves that are color coded to match the cards. By use of this model, educators are able to determine readiness for change and provide training related to the Rainbow of Colors Choice Food Pantry System, thereby assisting food pantries in addressing diet-sensitivities. Food pantries make the transition to client-choice with ease with the aid of this model as well as tips from other successful client-choice pantries like Freshplace.

To summarize, food pantry clients are not receiving the recommended amounts of specific foods that are required for healthy diets. Food pantry clients are choosing and eating foods based on what is available, and they can be nudged toward certain choices through a combination of placement, packaging and increasing choice in pantries. Increasing client choice has been proposed as a way to improve diet quality of pantry users and reduce food waste among pantry users. While there has been a push to move toward more client choice in food pantries (including changing layouts and distribution methods to do so), it is unclear how these changes are perceived by pantry clients,

staff/volunteers, and directors. Therefore, the purpose of this study was to determine perceived pantry-related satisfaction levels of food pantry clients, staff/volunteers, and directors and their association with degree of client-choice within food pantries.

Chapter 3 Manuscript

Methods

Study Overview

Voices for Food (VFF) is a six-state, federally-funded research project that aims to use community-based strategies to increase the availability of and access to nutritious food in isolated rural communities, thereby reducing food insecurity and improving diet quality among food pantry clients. One of the goals of VFF is to establish and/or strengthen Food Policy Councils (FPCs) in these communities, providing toolkits and Extension-led coaching for moving toward policy changes in local food pantries that increase the availability of, and access to healthy food, as well as incorporating client choice. As part of this three-year intervention, baseline and follow-up data were collected assessing the degree to which pantries were incorporating client choice. Additionally, client surveys assessed perceived satisfaction with elements of the pantry including amount, variety, and choice. Food pantries within the six designated VFF states (Figure 1) were selected for either intervention or comparison groups; this was based on the pantry's current layout (traditional or choice), and community and food pantry attributes. Each state had two intervention and two comparison pantries (n=24 pantries). Institutional Review Board (IRB) approval was obtained for this study prior to all intervention and data collection activities.

Subjects

Participants for the original VFF study were recruited from each participating food pantry by way of fliers within the pantry (highly trafficked areas) as well as

throughout the given community, and by word-of-mouth. Participants that chose to partake in the study were further screened for eligibility, which included: legal adults, ability to read and speak English, have accessed the specific food pantry more than one time within the previous twelve months, and have access to a telephone or computer for future data collection. Information sheets regarding the program's goals and objectives were provided to willing participants at the time of the screening evaluation. A total of 612 food pantry clients were deemed eligible and completed baseline data collection. For this analysis, only individuals who completed both baseline and follow-up data collection were included, and they would have visited the food pantry before and after the intervention (n=191). As compensation for their time during each data collection time point, participants were given up to \$30 in stipends for a local grocery store, depending on number of assessments completed.

Food pantry staff/volunteers (n=101) and directors (n=41) were recruited to complete VFF survey assessments at each data collection time point. All food pantry staff/volunteers and food pantry directors received \$10 in stipends to a local grocery store when possible, pertaining to each number of assessments completed.

Assessment Tools

Participant Surveys: Surveys were administered pre- and post-intervention among food pantry clients, food pantry staff/volunteers and food pantry directors. The food pantry client survey, a 54-question survey, collected demographic information and perceived satisfaction with amount of food, variety of food and choice within the pantry. Specific questions included the following: "How satisfied are you with the amount of

food that you and others in your household receive at this food pantry? How satisfied are you with the variety of food that you and others in your household receive at this food pantry? How satisfied are you with the amount of choice you have in foods you can take the home from this food pantry” Possible responses ranged from very satisfied and somewhat satisfied to somewhat dissatisfied and very dissatisfied.

The food pantry staff and volunteer survey, a 34-question survey, was utilized to collect information about food pantry staff/volunteer perceived satisfaction levels with the way foods were displayed as well as how foods were distributed. Specific questions included: “During the past 12 months, did the pantry make any changes in the way food was displayed for clients? During the past 12 months, did the pantry make any changes in the way food was given out?” Possible responses to these questions included yes, no, and don’t know.

The food pantry director survey, a 42-question survey, was utilized to collect information about food pantry director’s perceived satisfaction levels with the way foods were displayed and how foods were distributed, as well as questions regarding obtaining and distributing amounts of different foods. These specific questions included: “During the past 12 months, did the pantry make any changes in the way food was displayed for clients? During the past 12 months, did the pantry make any changes in the way food was given out?” Possible responses to these questions included yes, no, or don’t know. Another question was, “Compared to a year ago, does this food pantry obtain and distribute more, less, or about the same amount of fruits and vegetables/dairy/whole grain foods/protein?”

All surveys were initially administered electronically, with paper copies being collected and hand-entered by project staff when necessary. Follow up surveys were emailed to participants or completed via telephone if an individual lacked access to a

computer. Quarterly reminders were sent to all participants to stay connected, keep contact information updated, and promote upcoming data collection opportunities.

MyChoice Observation: A scoring tool was developed to assess implementation of desired elements of guided client choice and other pantry layout attributes as described in the Voices for Food: Food Pantry Toolkit. This 15-question tool involved documenting the key components of the MyChoice food pantry model that were physically in place at the pantry and part of the food, food display, and distribution process. The maximum score possible for these scorecards was 48, with more points indicating more components of the MyChoice food pantry model were being utilized. Project coordinators were responsible for data collection pre- and post-intervention, scoring the pantries in their respective communities.

Statistical Analyses

All data for this pre/post analysis were analyzed by using Stata version 14.2 (College Station, TX: StataCorp LLC). Descriptive statistics (mean, standard deviations, frequencies, and percentages) were calculated to describe specific characteristics of the given participant sample. The change in pantry client satisfaction outcome scores (amount, variety, and choice) from pre- to post-intervention were calculated. Linear regression was used to examine associations between changes in satisfaction scores and changes in MyChoice scores (client choice). A change in choice score variable was created that captured the difference between the original MyChoice score (baseline) and 3-years later (post-intervention) score. This was then put in the model as an independent

variable to examine its association with client satisfaction outcomes while controlling for intervention status, sex and age. Direction of association and p-values are reported.

The food pantry staff/volunteer and food pantry director perception outcomes post-intervention (food display and distribution) were dichotomized into either ‘yes’ or ‘no/don’t know’. Food pantry director perceptions regarding different available foods were dichotomized into either ‘more’ or ‘less/about the same’. Logistic regression was used to examine differences in perception variables and client choice. The change in MyChoice score variable was put into the model as an independent variable while controlling for intervention status, sex and age. Odds ratios and p-values are reported.

Results

Food Pantry Clients and Perceptions

Participant characteristics are presented in Table 1. The mean participant age was 56.4 years and the study population were predominately female and white. Majority of participants either did not graduate high school (27.1%) or only received a high school degree (35.3%); the remaining participants (36.8%) were granted another form of education. Most participants lived in a house, condo or mobile home (73.5%) while 21.97% lived in an apartment. Majority of participants were not working (74.8%) and reasons for this included retirement (31.3%) or disability (43.8%). The average household size was 3 people.

Client satisfaction with amount, variety and choice of food received at baseline is shown in Table 2. Over half of participants were very satisfied with the amount of food received (62%). About 59% of participants were very satisfied with the variety of foods

offered, and 58% of participants reported being very satisfied with the amount of choice they had in their food. Significant increases in client satisfaction with amount and variety were seen pre- to post-intervention ($p=.041$ and $p=.008$, respectively). No significant increases in client satisfaction with choice were seen pre- to post-intervention ($p=.077$).

MyChoice Observation Score Change

MyChoice Observation score changes from baseline to post-intervention can be found in Table 1. Over the course of the 3-year intervention, mean score per pantry increased by 8.4 points (± 8.1 SD).

Food Pantry Staff and Volunteer Perceptions

Food pantry staff and volunteer perceptions on food display and distribution are shown in Table 3 and 4. Staff/volunteers showed high rates of satisfaction with pantry changes ($>90\%$). The odds of staff and volunteers reporting satisfaction with food display ($OR=1.2$, $p<0.05$) and distribution ($OR=1.2$, $p<0.05$) increased as the MyChoice score increased. The greater the MyChoice observation score change, the more likely the staff/volunteers were to say that there was a way in which they displayed foods and how foods were given out.

Food Pantry Director Perceptions

Food pantry director perceptions regarding different available foods can be found in Table 4. The odds of food pantry directors reporting changes in how food was displayed and distributed did not significantly vary by MyChoice score. The odds of food

pantry directors reporting more quantity/distribution of different food groups increased as the MyChoice score increased: fruits and vegetables (OR=1.2, $p<0.05$), grains (OR=1.2, $p<0.05$), dairy (OR=1.4, $p<0.05$), and protein (OR=1.3, $p<0.05$).

Discussion

Multiple studies have been conducted in food pantries looking at dietary quality of clients and food options. While client choice in pantries has been explored to an extent, no research examines how the shift to client choice within food pantries is perceived by food pantry clients, staff/volunteers or directors. The present study examined the associations between food pantry client satisfaction and pantry client choice scores as well as food pantry staff/volunteer and director perceptions and pantry client choice scores. The odds of pantry clients being very satisfied with food amount and variety increased with increasing choice score, as did food pantry staff/volunteer perceptions of food display and distribution. Additionally, as the MyChoice score increased, food pantry directors were more likely to report obtaining and distributing more of the different food groups within the past year of the intervention.

Food Pantry Client Perceptions

Food pantry client self-reported satisfaction with amount of food received was significantly associated with client choice in this study, with greater improvements in satisfaction being seen with higher MyChoice change scores. This result may be due to the change in overall pantry layout and distribution method. Shelving changes involving MyPlate organization and labeling can provide greater awareness of food in different

food groups that may be unfamiliar to clients. Personal shopping experiences can give clients the ability to shop for the foods they desire most and provide them with feelings of autonomy and freedom of choice. Without freedom of choice, there poses a risk of receiving undesirable foods which can lead to a decline in household food supply.

Kendall et. al.¹⁴ discuss the issue of food insecurity being a result of food supply and the overall effect it can have on households. The key point indicates that household food supplies decline significantly as food insecurity status worsens; the more food insecure, the less amount of foods available in the household. This can have adverse effects on client choice because less amounts of foods may result in the persistence of food insecurity which in turn may result in poor health status. To put into perspective, the study specifies the issue with the declining consumption frequency of fruits, vegetables, dairy, grains and meat. It was found that these frequencies also decline as food insecurity worsens. Satisfaction with amount is important because it may just lead to a change in food insecurity direction. The conceptual idea of allowing the freedom of choice, especially of different food groups to clients, can help with health status as well. Food insecurity proposes a risk of obtaining little food amounts in the household, let alone healthy foods. With this in mind, the greater amounts of different food groups provided can have a positive impact on health status in clients.

Self-reported satisfaction with variety of food was also significantly associated with client choice, with higher increases in satisfaction being seen with higher MyChoice change scores. This may be a result of the pantry transition to MyChoice. The MyChoice layout provides clients with more choice experiences in which a greater variety is easily accessed (more foods within the different food groups). Variety in client selections is

important. Simmet et. al.⁴ discovered multiple issues with food variety consumption among food pantry clients. Overall diet qualities were found to be non-health promoting (HEI scores <50 indicated unhealthy diets, average scores were 42.8). Different food groups were analyzed; in all articles, except one, fruit and vegetable mean intakes were below recommendation. None of the studies examined found adequate mean intake of milk products either. Grain consumption was more varied between studies, some reporting adequate intakes and others reporting below recommended consumption rates. When meat and alternative products were investigated, majority of studies found this to be within recommendations. The issue of food variety among food pantries is evident when foods within different food groups are consumed in adequate quantities while others are not. Pantry clients need to consume a variety in order to have better diets and health status overall. Food pantries that can expand to different food groups can lead to a downward trend of poor health status among food insecure clients.

Client satisfaction with choice was not associated with MyChoice change score. This may be a result of current client gratification towards food options. Satisfaction levels regarding choice may not always be a high priority, in fact pantry clients may tend to display satisfaction regardless of pantry layouts. According to Remley et. al.¹⁵, pantry clients express consistent gratitude regarding the gift of food. Some of these expressions include: “I am blessed with everything that they gave us and nothing goes to waste,” “They help me survive and get by,” “I appreciate the extra food, it makes a big difference”, and “Help is good - when you are starved everything is good”. Choice is however an influential factor within the food pantry system.

Food Pantry Staff and Volunteer Perceptions

Odds of being satisfied with food display and distribution increased with change in choice score. The MyChoice scorecard captures a multitude of outcomes aimed at transitioning food pantries to client-choice. Outcomes that are encompassed on the scorecard and were encouraged for implementation include but are not limited to: pantry shelves organized and labeled by the MyPlate food groups, color-coded shelves associated with specific food groups (i.e. dairy=blue), encourage physically able clients to remove their own items from shelves and place them in their carts or bags, and different marketing strategies to promote healthy eating (i.e. healthy options placed in special areas (i.e. front of the line) and unhealthy foods being in harder to reach areas). Following this guideline, pantries would be able to reconfigure shelving and shopping methods as well as aid clients in selecting foods for themselves. These changes were perceived as positive by staff and volunteers because they allowed for greater acknowledgement of food options within the food pantry as well as emphasized for personal food shopping by the clients themselves.

Food Pantry Director Perceptions

The odds of being satisfied with obtaining and distributing fruits and vegetables, grains, dairy, and protein increased with change in choice score. The MyChoice layout can generate substantial change in the food pantry system (i.e. plentiful food groups), and the variability in these changes originated with the MyChoice Observation Tool. The MyChoice Observation Tool encourages pantries to provide more healthful options into their inventories by utilizing MyPlate (nutritional guide) by ways of shelf organization

and labeling. By incorporating the MyChoice Observation Tool's guidelines, the quantity of foods within different food groups may increase (i.e. unknown foods may be re-categorized into correct food groups). The changes being initiated by the VFF intervention and provided tools can be adopted and instilled into other food pantry systems; the ease of understanding and applying to the MyChoice Observation Tool can be a starting point to transitioning more pantries towards guided client-choice.

Limitations & Strengths

This study is not without limitations. Eligibility for the study included being above the age of 18 (19 in Nebraska), English speaking, and having visited the food pantry within the previous 12 months. As such, the findings may not be able to be generalized to other pantry client population. Other limitations include social desirability bias; participants may have provided desirable answers (or omitted undesirable answers) to the given surveys and this could have affected overall results. The issue of loss to follow-up was also an issue in which not all possible data was collected. Despite these limitations, the study had many strengths. For example, data were collected in multiple states. This allowed for data collection from more pantries than working in one state alone. It is also a large sample size of this type of population and so data is perhaps representative of these clients within these pantries. Generalizability of our findings are possible, given the diversity of locations and people that participated, although the results are still limited to rural Midwestern pantries.

Conclusion

Overall, study results indicate that food pantries can change over time toward a MyChoice, client-centered approach, and that client satisfaction of amount and variety of food improves with those changes. Moreover, staff/volunteers are supportive of the changes and directors indicate having more foods from food groups crucial to food pantry user diet quality. The MyChoice Observation tool can be used as a starting point for food pantries interested in transitioning toward guided client-choice.

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Figure 1. Designated States in which Voices for Food was implemented.



Table 1. Participant characteristics of a sample of rural community food pantry clients within six midwestern states (n=191)

	N (%)	MEAN (SD)
AGE		56.4 (13.4)
GENDER		
MALE	38 (28.6)	
FEMALE	94 (70.7)	
RACE		
WHITE	108 (96.4)	
NON-WHITE	4 (3.6)	
EDUCATION		
DID NOT GRADUATE HIGH SCHOOL	36 (27.1)	
HIGH SCHOOL GRADUATE	47 (35.3)	
SOME COLLEGE OR MORE	49 (36.8)	
HOUSING		
A HOUSE, CONDO, OR MOBILE HOME	97 (73.5)	
AN APARTMENT	29 (22.0)	
OTHER	5 (3.8)	
EMPLOYMENT		
WORKING AT A JOB OR BUSINESS	23 (18.1)	
NOT WORKING AT A JOB OR BUSINESS	95 (74.8)	
OTHER	8 (6.3)	
HOUSEHOLD SIZE		2.8 (2.0)
HOUSEHOLD INCOME		
\$5,000 OR LESS	30 (22.9)	
\$5,001 - \$10,000	33 (25.2)	
\$10,001 - \$15,000	22 (16.8)	
\$15,001 - \$20,000	13 (9.9)	
\$20,001 AND ABOVE	29 (22.1)	
FOOD SECURITY STATUS		
FOOD SECURE	23 (12.4)	
LOW FOOD SECURE	66 (35.5)	
MODERATE FOOD SECURE	23 (12.4)	
VERY LOW FOOD SECURE	73 (39.3)	
FOOD PROGRAM PARTICIPATION		
SNAP/FOOD STAMPS (YES/NO)	77/52 (58.8/39.7)	
MEALS ON WHEELS (YES/NO)	11/121 (8.3/91.7)	
SOUP KITCHEN (YES/NO)	32/96 (24.4/73.3)	
WIC (YES/NO)	9/122 (6.9/93.1)	
NUMBER OF CHRONIC DISEASES IN THE HOUSEHOLD		
0	43 (28.1)	
1-2	64 (41.8)	
3-5	46 (30.1)	
MYCHOICE SCORE CHANGE		8.4 (8.1)
SNAP=Supplemental Nutrition Assistance Program, WIC=Women, Infant and Children		

Table 2. Baseline Food Pantry Clientele Satisfaction Levels with Food Amount, Variety, and Choice and the Provided MyChoice Score Change from Baseline to Post-Intervention.

	Very Satisfied N (%)	Somewhat Satisfied N (%)	Somewhat Dissatisfied N (%)	Very Dissatisfied N (%)	p-value for positive change in satisfaction score
How satisfied are you with the amount of food that you and others in your household receive at this food pantry?	69 (61.6)	29 (25.9)	11 (9.8)	2 (1.8)	0.04
How satisfied are you with the variety of food that you and others in your household receive at this food pantry?	65 (58.6)	36 (32.4)	7 (6.3)	2 (1.8)	0.01
How satisfied are you with the amount of choice you have in foods you can take home from this food pantry?	65 (58.0)	36 (32.1)	8 (7.1)	2 (1.8)	0.07

Table 3. Food Pantry Staff and Volunteer Perceptions on Food Display and Distribution.

	N (%)
Satisfaction in Foods Displayed	
Yes/No	38/1 (97.4/2.6)
Satisfaction in Foods Given Out	
Yes/No	33/3 (91.7/8.3)

Table 4. Food Display and Distribution Odds Ratios Given for Food Pantry Staff/Volunteers and Food Pantry Directors from Baseline to Post-Intervention.

	Staff/Volunteers (n=101)		Directors (n=41)	
	OR	P-value	OR	P-value
During the past 12 months, did the pantry make any changes in the way food was displayed for clients?	1.2	0.00	0.9	0.55
During the past 12 months, did the pantry make any changes in the way food was given out?	1.2	0.00	1.2	0.06
OR=Odds Ratio; SE=Standard Error; P=P-value				

Table 5. Food Pantry Director Perceptions on Change in Availability and Distribution of Nutrient Dense Foods

	OR (SE)	P
Compared to a year ago, does this food pantry currently obtain and distribute more, less or, about the same amount of fruits and vegetables?	1.2 (0.1)	0.01*
Compared to a year ago, does this food pantry currently obtain and distribute more, less or, about the same amount of grains?	1.2 (0.1)	0.01*
Compared to a year ago, does this food pantry currently obtain and distribute more, less or, about the same amount of dairy?	1.4 (0.2)	0.02*
Compared to a year ago, does this food pantry currently obtain and distribute more, less or, about the same amount of protein?	1.3 (0.1)	0.01*
OR=Odds Ratio; SE=Standard Error; P=P-Value *indicates significance		

Appendices

Appendix A. Pantry Client Survey

Sponsored by: South Dakota State University - QuestionPro Academic Endorsement Program

Survey: POST_PAST Pantry Client

INTRODUCTION

We are asking people in rural areas about the foods available in their communities. This survey is part of a project sponsored by the U.S. Department of Agriculture. It is being conducted by South Dakota State University and partnering institutions. We will use the answers that you provide to help create and strengthen local efforts to increase the amount and types of healthy foods available to low-income members of your community. We want to learn about you, your interest and involvement in how low-income members of your community obtain food. We also want to know your thoughts on how easy or hard it is to get healthy foods (specifically fruits, vegetables, low-fat dairy, whole grains, and lean protein foods) in your community.

Thank you for your honest and thoughtful responses. The survey will take about 30 minutes to complete. You do not have to take part in this research project. If you agree to take part you can stop at any time or choose to not answer any question. Your personal information will not be linked with your answers and all of the information you provide will be kept confidential. If you have any questions, please contact your local study representative.

* Please enter your study ID here (this is given to you by your local study representative)

BACKGROUND ON YOU

What is your current age (in years)?

What is your sex?

☐ Male

☐ Female

☐ Prefer not to answer

Are you of Hispanic, Latino, or Spanish origin?

☐ Yes

☐ No

☐ Prefer not to answer


What is your race? (Please check all the responses that apply)

☐ American Indian or Alaska Native

☐ Asian

☐ Black or African American

POST_PAST Pantry Client

 QuestionPro

☐ Native Hawaiian or other Pacific Islander

☐ White

☐ Other (please specify)

☐ Prefer not to answer

What is the highest grade or level of school you have completed or the highest degree you have received? (Please check only one response)

☐ Did not graduate high school

☐ High School graduate

☐ GED or equivalent

☐ Business trade school

☐ Some college, no degree

☐ Associate degree: Occupational, technical or vocational program

☐ Bachelor's degree (Example: BA, AB, BS, BBA)

☐ Master's Degree (Example: MA, MS, MEd, MBA, MPH)

☐ Professional School (Example: MD, DDS, DVM, JD)

☐ Doctoral Degree (Example: PhD, EdD)

☐ Other (please specify)

☐ Prefer not to answer

Please tell me the kind of place where you now live? Is it.. (Check only one)

☐ A house, condo, or mobile home

☐ An apartment

☐ A room

☐ A hotel/motel

☐ A shelter or mission

☐ A car, van, or other vehicle

☐ An abandoned building

☐ A public space, railroad/bus station

☐ Anywhere outside (on the streets, in a park)

☐ Other (please specify)

In the last 12 months, have you lived in any other place besides where you now live?

☐ Yes

☐ No

Do you have use of a place to make a meal?

☐ Yes

☐ No

Do you own or have use of any of the following. (Please check all the responses that apply)

☐ A hotplate

☐ A toaster

☐ A toaster oven

☐ A stove

☐ A microwave

☐ A refrigerator

The next questions are about your current job or business. Which of the following were you doing last week?

☐ Working at a job or business

☐ With a job or business but not at work

☐ Looking for work

☐ Not working at a job or business

☐ Don't know

What is the main reason you did not work last week?

☐ Taking care of house or family

☐ Going to school

☐ Retired

☐ Unable to work for health reasons

☐ On layoff

- ☐ Disabled
- ☐ Don't know
- ☐ Other (please specify)

In the last 12 months (52 weeks) have you been employed for 6 months or 26 weeks out of the year?

- ☐ Yes
- ☐ No
- ☐ Don't know

Which form of transportation do you usually use to get food for your household? (Check only one box)

- ☐ I drive
- ☐ I take public transportation (taxis, buses)
- ☐ Someone else drives me
- ☐ I walk
- ☐ I ride a bicycle
- ☐ Don't know
- ☐ Other form of transportation (Please specify)

About Your Household

The next set of questions refer to your household--including you and all the people who live with you.

How many people live in your household this month? By household, we mean people who live together and share living expenses. Include any people who lived with you more than half of the time in the last month. **Please include yourself in the count.**

- ☐ 1
- ☐ 2
- ☐ 3
- ☐ 4
- ☐ 5
- ☐ 6
- ☐ 7
- ☐ 8

- ☐ 9
- ☐ 10 or more
-

How many are ages 65 and above?

How many are ages 19- 64?

How many are ages 13-18?

How many are ages 6-12?

How many are ages 1-5?

How many are under 1 year of age?

Now we would like to ask you about your total household income.

Which category represents the total combined income of all members of your household during the past 12 months. This includes income from jobs, income from business, pensions, Social Security or retirement payments, disability payments, and any other money income received. Was it...

- ☐ Zero
- ☐ \$5,000 or less
- ☐ \$5,001 - \$10,000
- ☐ \$10,001 - \$15,000
- ☐ \$15,001 - \$20,000
- ☐ \$20,001 - \$25,000
- ☐ \$25,001 - \$30,000
- ☐ \$30,001 - \$35,000
- ☐ \$35,001 - \$50,000
- ☐ More than \$50,000
- ☐ Don't know
-

Have you been told by a doctor or other health professional that you or anyone in your household has any of the following health conditions:

- ☐ High blood pressure
- ☐ High cholesterol
-

- ☐ Diabetes
- ☐ Obesity
- ☐ Food allergies
- ☐ Don't know

FOOD PROGRAM PARTICIPATION

The next few questions are about food benefits and meals you or others in your household received from community or government programs in the last 12 months.

Did you or anyone in your household receive Food Stamps (also called SNAP) in the last 12 months?

- ☐ Yes
- ☐ No
- ☐ Don't know

In the last 12 months did you or anyone in your household receive any meals delivered to your home from community programs, "Meals on Wheels", or any other programs?

- ☐ Yes
- ☐ No
- ☐ Don't know

In the last 12 months, did you or anyone go to a soup kitchen, or other place where they receive prepared meals?

- ☐ Yes
- ☐ No
- ☐ Don't know

Did you or anyone in your household receive benefits from WIC, that is, the Women, Infants, and Children program, in the last 12 months? (WIC is short for the Special Supplemental Nutrition Program for Women, Infants, and Children. This program provides nutritional screening and specific foods to pregnant and postpartum women and their infants, and children up to age 5.)

- ☐ Yes
- ☐ No
- ☐ Don't know

In the last 12 months, did any of the children in your household receive free or reduced price meals at their school or child

care?

- ☐ There are no children under 18 in my household
 - ☐ Yes
 - ☐ No
 - ☐ No children attended school or child care
 - ☐ Don't know
-

In the last 12 months, did any child in your household get a free or reduced price meal at any summer program he or she attended?

- ☐ There are no children under 18 in my household
 - ☐ Yes
 - ☐ No
 - ☐ No children attended a summer program
 - ☐ Don't know
-

Household Food Security

For the next three questions below, please answer whether the statement was OFTEN TRUE, SOMETIMES TRUE, or NEVER TRUE for your household in the last 12 months.

"I/We worried whether my/our food would run out before I/we got money to buy more."

- ☐ Often true
 - ☐ Sometimes true
 - ☐ Never true
 - ☐ Don't know
-

"The food that I/we bought just didn't last, and I/we didn't have money to get more."

- ☐ Often true
 - ☐ Sometimes true
 - ☐ Never true
 - ☐ Don't know
-

"I/we couldn't afford to eat balanced meals." For this question, a "balanced meal" includes all the types of food that you think should be in a healthy meal.

- ☐ Often true
 - ☐ Sometimes true
-

- ☐ Never true
- ☐ Don't know

"I/We relied on only a few kinds of low-cost food to feed my/our child/children because I was/we were running out of money to buy food." Was that OFTEN, SOMETIMES, OR NEVER TRUE for you/your household in the last 12 months?

- ☐ There are no children under 18 in my household
- ☐ Often true
- ☐ Sometimes true
- ☐ Never true
- ☐ Don't know

"I/We couldn't feed my/our child/the children a balanced meal, because I/we couldn't afford that." Was that OFTEN, SOMETIMES, OR NEVER TRUE for you/your household in the last 12 months?

- ☐ Often true
- ☐ Sometimes true
- ☐ Never true
- ☐ Don't know

32. "My/Our child was/the children were not eating enough because I/we just couldn't afford enough food." Was that OFTEN, SOMETIMES, OR NEVER TRUE for (you/your household) in the last 12 months?

- ☐ Often true
- ☐ Sometimes true
- ☐ Never true
- ☐ Don't know

In the last 12 months, did you/you or other adults in your household ever cut the size of your meals or skip meals because there wasn't enough money for food?

- ☐ Yes
- ☐ No
- ☐ Don't know

How often did this happen?

- ☐ Almost every month
- ☐ Some months but not every month

- ☐ Only 1 or 2 months
 - ☐ Don't know
-

In the last 12 months, did you ever eat less than you felt you should because there wasn't enough money for food?

- ☐ Yes
 - ☐ No
 - ☐ Don't know
-

In the last 12 months, were you ever hungry but didn't eat because there wasn't enough money for food?

- ☐ Yes
 - ☐ No
 - ☐ Don't know
-

In the last 12 months, did you lose weight because there wasn't enough money for food?

- ☐ Yes
 - ☐ No
 - ☐ Don't know
-

In the last 12 months, did you or other adults in your household ever not eat for a whole day because there wasn't enough money for food?

- ☐ Yes
 - ☐ No
 - ☐ Don't know
-

How often did this happen?

- ☐ Almost every month
 - ☐ Some months but not every month
 - ☐ Only 1 or 2 months
 - ☐ Don't know
-

In the last 12 months, since (current month) of last year, did you ever cut the size of (your child's/any of the children's) meals because there wasn't enough money for food?

- ☐ There are no children under 18 in my household
 - ☐ Yes
 - ☐ No
 - ☐ Don't know
-

In the last 12 months, did (your child/any of your children) ever skip meals because there wasn't enough money for food?

- ☐ Yes
 - ☐ No
 - ☐ Don't know
-

How often did this happen?

- ☐ Almost every month
 - ☐ Some months but not every month
 - ☐ Only 1 or 2 months
 - ☐ Don't know
-

In the last 12 months, was (your child/were any of the children) ever hungry but you just couldn't afford more food?

- ☐ Yes
 - ☐ No
 - ☐ Don't know
-

In the last 12 months, did (your child/any of the children) ever not eat for a whole day because there wasn't enough money for food?

- ☐ Yes
 - ☐ No
 - ☐ Don't know
-

WHERE YOUR HOUSEHOLD GETS FOOD

Where does your household usually get food and beverages that you eat at home? Is it from... (Check all that apply)

- ☐ A Supermarket (such as Food Lion, Wal-Mart, Sam's Club, HyVee, etc.)
 - ☐ A Convenience store (such as a gas station with food store attached)
 - ☐ A Farmers' Market or Roadside stand
 - ☐ A Community garden
-

- ☐ Your own garden or farm
- ☐ A program that delivers free or low cost meals to your home (sometimes called Meals on Wheels)
- ☐ Friends, neighbors, or family
- ☐ A Place of worship
- ☐ Food Pantry
- ☐ Don't know
- ☐ Other (please specify)

How many different food pantries have you gone to for food in the last 12 months?

- ☐ 0
- ☐ 1
- ☐ 2-3
- ☐ 4-5
- ☐ 6-7
- ☐ 8-9
- ☐ 10 or more
- ☐ Don't know

Thinking of all the food pantries you visited in the past month, how much of your household food would you say was provided through these programs?

- ☐ A few days worth of food
- ☐ One to two weeks worth of food
- ☐ More than half of our food for the month
- ☐ Almost all of our food for the month
- ☐ I did not visit a pantry in the last month
- ☐ Don't know

YOUR EXPERIENCE AT THIS FOOD PANTRY

The next set of questions is about your experience at this food pantry.

During the past 12 months, how many times have you come to this pantry to get food? If you are at the pantry today, do not include this in your total.

- ☐ 0

- ☐ 1
 - ☐ 2-3
 - ☐ 4-5
 - ☐ 6-7
 - ☐ 8-9
 - ☐ 10 or more
-

Does your household obtain food from a food pantry?

- ☐ Yes
 - ☐ No
-

For the next two questions, please rate how satisfied you are with different aspects of this food pantry.

How satisfied are you with the amount of food that you and others in your household receive at this food pantry. Are you..

- ☐ Very satisfied
 - ☐ Somewhat satisfied
 - ☐ Somewhat dissatisfied
 - ☐ Very dissatisfied
 - ☐ Don't know
-

How satisfied are you with the variety of food that you and others in your household receive at this food pantry? Are you..

- ☐ Very satisfied
 - ☐ Somewhat satisfied
 - ☐ Somewhat dissatisfied
 - ☐ Very dissatisfied
 - ☐ Don't know
-

Which types of foods do you want but do not usually get from this food pantry?

- ☐ Fresh fruits and vegetables
 - ☐ Low-fat protein food items such as lean meats
 - ☐ Skim or low-fat dairy products, such as milk, yogurt or cheese
 - ☐ Whole grain foods
-

- ☐ I get all the types of foods I want at this food pantry
- ☐ Don't know
-

When you come to this food pantry, how often are you treated with respect by the people who distribute food?

- ☐ Very often
- ☐ Sometimes
- ☐ Never
- ☐ Don't know
-

When you come to this food pantry, how comfortable do you feel talking with pantry workers about your food and other needs?

- ☐ Very comfortable
- ☐ Somewhat comfortable
- ☐ Not comfortable
- ☐ Don't know
-

Which of the following reasons are the main reasons you go to food pantries. (Check all responses that you think are the main reasons you go to food pantries)

- ☐ I go to food pantries when food is running low.
- ☐ I go to food pantries so I can use my money to pay for bills and other necessities.
- ☐ I go to food pantries to provide my household with extra foods.
- ☐ I go to food pantries to provide my household with more healthy foods.
- ☐ Don't know
- ☐ I go to food pantries for another reason (Please specify other reason)

How satisfied are you with the amount of choice you have in the foods you can take home from this food pantry? Are you...

- ☐ Very satisfied
- ☐ Somewhat satisfied
- ☐ Somewhat dissatisfied
- ☐ Very dissatisfied
- ☐ Don't know
-

Please explain your answer.

In the last 12 months, have you been to any food or nutrition-related classes, workshops or food demonstrations at this pantry?

- ☐ Yes
- ☐ No
- ☐ Don't Know

How many did you attend? (#)

Which of the following topics were covered by those classes, workshops, or food demonstrations? (Check all responses that apply)

- ☐ Nutrition
- ☐ Food safety
- ☐ How to stretch limited food dollars and eat healthfully
- ☐ Don't know

In the last 12 months, did you see any written information about nutrition at this food pantry, for example handouts, brochures, recipes, or posters?

- ☐ Yes
- ☐ No
- ☐ Don't know

In the last 12 months, did pantry staff or volunteers ever talk to you about nutrition or healthy foods?

- ☐ Yes
- ☐ No
- ☐ Don't know
-

Community Perceptions

How many people in your community do you think regularly run out of resources to buy food for themselves or their family?

- ☐ Many -- more than 40%
 - ☐ Some -- 20 to 39%
 - ☐ Few -- 19% and below
 - ☐ None
 - ☐ Don't know
-

Please rate your agreement with each of the following statements:

People in my community who regularly run out of resources to buy food for themselves or their families usually eat a healthy diet.

- ☐ Strongly agree
 - ☐ Agree
 - ☐ Neither agree nor disagree
 - ☐ Disagree
 - ☐ Strongly disagree
-

People in my community would improve their eating habits if healthy foods were easier to get.

- ☐ Strongly agree
 - ☐ Agree
 - ☐ Neither agree nor disagree
 - ☐ Disagree
 - ☐ Strongly disagree
-

Providing nutrition education can help people in my community who regularly run out of resources to buy healthy food.

- ☐ Strongly agree
 - ☐ Agree
 - ☐ Neither agree nor disagree
 - ☐ Disagree
 - ☐ Strongly disagree
-

Providing information on how to stretch limited food budgets can help people in my community who regularly run out of resources to buy food.

- ☐ Strongly agree
 - ☐ Agree
 - ☐ Neither agree nor disagree
 - ☐ Disagree
 - ☐ Strongly disagree
-

Improving the healthfulness of foods at local food pantries can improve the health and well-being of pantry clients.

- ☐ Strongly Agree
 - ☐ Agree
 - ☐ Neither agree nor disagree
 - ☐ Disagree
 - ☐ Strongly disagree
-

Offering food pantry clients nutrition education can help clients eat a healthier diet.

- ☐ Strongly agree
 - ☐ Agree
 - ☐ Neither agree nor disagree
 - ☐ Disagree
 - ☐ Strongly disagree
-

Please rate your agreement with the statement below about the My Choice food pantry model. In this model, food pantries allow people to walk through the aisles and choose items from different food categories such as vegetables, fruits, dairy, grains and protein.

Using a MyChoice model in a food pantry can help pantry clients eat a healthier diet.

- ☐ Strongly agree
 - ☐ Agree
 - ☐ Neither agree nor disagree
 - ☐ Disagree
 - ☐ Strongly disagree
-

Using the MyChoice model in a food pantry can help keep pantry clients from running out of resources to buy foods.

- ☐ Strongly agree
 - ☐ Agree
 - ☐ Neither agree nor disagree
 - ☐ Disagree
 - ☐ Strongly disagree
-

Food-Related Community Activities

Is there a Voices for Food Council active in your area?

- ☐ Yes
 - ☐ No
 - ☐ Don't know
-

During the last 12 months, have you gone to any meetings of the local Voices for Food Council?

- ☐ Yes
 - ☐ No
-

What prevented you from doing going to meetings of the local Voices for Food Council?

If there is anything else you would like to tell us about how this food pantry helps you, please include here.

If there is anything else you would like to tell us about that should be improved at this food pantry, please include here.

Appendix B. MyChoice Observation Tool

State			
Community Name			
Pantry Name			
Data Collector Name			
Date			
Data Collection (circle one)	Baseline	Mid	Post

**OBSERVATION TOOL
FOOD PANTRY MY CHOICE MODEL**

- Is the food on the pantry shelves organized and labeled by the MyPlate food groups?
 - ☐ Yes, completely and correctly
 - ☐ Yes, but with the following variations or mistakes: _____
 - ☐ No, not at all
- Are each of the food shelves (includes all shelf levels) color-coded by food groups (vegetables=green, fruit=red, dairy=blue, grains=orange, protein foods = purple, combination = brown, miscellaneous = yellow)?
 - ☐ Yes, completely and correctly
 - ☐ Yes, but with the following variations or mistakes: _____
 - ☐ No, not at all
- Did pantry users have the opportunity to choose all, some, or none of the foods they take home from the pantry?
 - ☐ All
 - ☐ Some
 - ☐ None
- Did pantry users appear to have enough time to choose their food selections?
 - ☐ Yes, for all pantry users
 - ☐ Yes, for some pantry users
 - ☐ No
- Did pantry users have an easy way to bag and carry their food selections, such as with shopping carts and bags?
 - ☐ Yes, for all pantry users

- ☐ Yes, for some pantry users
☐ No
6. Did staff and volunteers encourage physically able clients to remove their own items from shelves and place them in their carts or bags?
☐ Yes, always
☐ Yes, sometimes
☐ No
7. Are one or more MyPlate nutrition education posters displayed at the pantry where users can see them?
☐ Yes
How many posters are displayed? _____
☐ No
8. Are nutrition education materials (such as MyPlate tip sheets, magnets, newsletters, etc.) offered to pantry users?
☐ Yes, Please list the types of materials offered

☐ No
9. Are any of the following marketing strategies observable at the pantry to promote users making healthy choices at the pantry? (*Check all that apply*)
☐ Healthy food choices are placed in special areas such as at the front of the line, at the beginning of the aisles, and on special displays.
☐ Unhealthy food choices are placed in harder to reach areas such as on the top or bottom of a shelf or in an inaccessible location where clients need to ask for help.
☐ Pantry offers incentives for healthier food selections (e.g. two items count as only one choice).
☐ There are samples of healthy food choices offered to pantry users.
☐ There are appealing labels for healthy food choices (e.g., “filling whole grain rice” or “local delicious apples”).
☐ Pantry users are offered recipes with healthy foods available at the pantry.
☐ Pantry users are offered recipes that highlight food group colors in the ingredients listing.
☐ Other Please describe

10. Did pantry staff and volunteers offer respectful customer service to clients?
☐ Yes, always
☐ Yes, sometimes
☐ No

If yes, please describe examples of the customer service you observed to make the above response choice:

11. Does the pantry have signage or other methods of providing information about and/or referrals to other public or private food assistance programs?

Yes, Please describe what you observed

☐ No

12. Does it appear that the pantry has enough staff or volunteers to provide intake and shopping assistant services?

☐ Yes

☐ No

13. Do staff and volunteers wear Voices for Food ambassador buttons?

☐ Yes, all

☐ Yes, some

☐ No

14. Is the USDA Civil Rights poster posted in a high-traffic visible location within the food pantry?

☐ Yes

☐ No

15. Do food pantry volunteers talk about nutrition with the clients?

☐ Yes, always

☐ Yes, sometimes

☐ No

If yes, please describe examples of the customer service you observed to make the above response choice:

Appendix C. Food Pantry Staff/Volunteer Survey



Study ID: _____

Date: _____

Pantry Name: _____

Data Collector: _____

Food Pantry Staff/Volunteer Questionnaire

INTRODUCTION

We are asking people in rural areas about the foods available in their communities. This survey is part of a project sponsored by the U.S. Department of Agriculture. It is being conducted by the (Department of XXX or XXX Extension at XXX University). We will use the answers that you provide to help create and strengthen local efforts to increase the amount and types of healthy foods available to low-income members of your community. We want to learn about you, your interest and involvement in how low-income members of your community obtain food. We also want to know your thoughts on how easy or hard it is to get healthy foods (specifically fruits, vegetables, low-fat dairy, whole grains, and lean protein foods) in your community.

Thank you for your honest and thoughtful responses. The survey will take about 30 minutes to complete. You do not have to take part in this research project. If you agree to take part you can stop at any time or choose to not answer any question. Your personal information will not be linked with your answers and all of the information you provide will be kept confidential. If you have any questions, please call XXX XXXX at xxxxxx at -xxx-xxxx.

BACKGROUND ON YOU

- | | |
|--|--|
| <p>1. Would you describe your town or community as “rural”?</p> <p><input type="checkbox"/> Yes</p> <p><input type="checkbox"/> No</p> <p>2. What is your age? _____ (Place an X in the box that best describes your age)</p> <p><input type="checkbox"/> Under 18</p> <p><input type="checkbox"/> 18 to 24</p> <p><input type="checkbox"/> 25 to 34</p> <p><input type="checkbox"/> 35 to 44</p> <p><input type="checkbox"/> 45 to 54</p> <p><input type="checkbox"/> 55 to 64</p> <p><input type="checkbox"/> 65 to 74</p> <p><input type="checkbox"/> Over 74</p> <p>3. What is your sex? (Place an X in the box next to <u>one</u> response)</p> | <p><input type="checkbox"/> Male</p> <p><input type="checkbox"/> Female</p> <p>4. What is your ethnicity? (Place an X in the box next to <u>one</u> response)</p> <p><input type="checkbox"/> Hispanic or Latino</p> <p><input type="checkbox"/> Not Hispanic or Latino</p> <p><input type="checkbox"/> Don't know</p> <p>5. What is your race? (Place an X in all boxes that apply.)</p> <p><input type="checkbox"/> American Indian or Alaska Native</p> <p><input type="checkbox"/> Asian</p> <p><input type="checkbox"/> Black or African American</p> <p><input type="checkbox"/> Native Hawaiian or other Pacific Islander</p> <p><input type="checkbox"/> White</p> <p><input type="checkbox"/> Other (please specify) _____</p> <p><input type="checkbox"/> Don't know</p> |
|--|--|

6. What is the highest grade or level of school you have completed? *(Place an X in the box next to one response)*

- ☐ Did not graduate high school
☐ High School graduate
☐ GED or equivalent
☐ Business trade school
☐ Some college, no degree
☐ Associate degree: Occupational, technical or vocational program
☐ Bachelor's degree (example: BA, AB, BS, BBA)
☐ Master's Degree (example: MA, MS, MEd, MBA, MPH)
☐ Professional School (example: MD, DDS, DVM, JD)
☐ Doctoral Degree (example: PhD, EdD)
☐ Other *(please specify)* _____
☐ Don't know

7. This question applies to your employment status: Are you currently...? *(Place an X in all boxes that apply)*

- ☐ Employed for wages or salary
☐ Self-employed
☐ Out of work and looking for work
☐ Out of work but not currently looking for work
☐ A homemaker
☐ A student
☐ Retired
☐ Unable to work
☐ Active military
☐ Non-active military
☐ A Veteran
☐ Other
(Please specify) _____

8. How would you describe your involvement at this food pantry?

- ☐ I work at this food pantry
☐ I volunteer at this food pantry
☐ Other

(Please describe) _____

9. When did you first start volunteering or working at this food pantry?

- ☐ Less than one year ago
☐ 1 - 5 years ago
☐ More than 5 years ago

10. During the past 12 months, how many hours per month did you usually volunteer or work at this food pantry?

- ☐ 5 hours or less
☐ 6 to 10 hours
☐ 11 to 15 hours
☐ 16 to 20 hours
☐ 21 to 30 hours
☐ 31 to 40 hours
☐ 41 or more hours

COMMUNITY PERCEPTIONS

11. How many people in your community do you think regularly run out of resources to buy food for themselves or their family?

- ☐ Many – more than 40%
☐ Some – 20 to 39%
☐ Few – 19% and below
☐ None
☐ Don't Know

Please rate your agreement with each the following statements:

12. People in my community who run out of resources to buy food for themselves or their families usually eat a healthy diet.

- ☐ Strongly agree
☐ Agree
☐ Neither agree nor disagree
☐ Disagree
☐ Strongly disagree

13. People in my community would eat a better diet if healthy foods were easier to get.

- ☐ Strongly agree
☐ Agree
☐ Neither agree nor disagree

- ☐ Disagree
☐ Strongly disagree

14. Providing nutrition education can help people in my community who regularly run out of resources to buy food. ☐ Strongly agree

- ☐ Agree
☐ Neither agree nor disagree
☐ Disagree
☐ Strongly disagree

15. Providing information on how to stretch limited food budgets can help people in my community who regularly run out of resources to buy food.

- ☐ Strongly agree
☐ Agree
☐ Neither agree nor disagree
☐ Disagree
☐ Strongly disagree

16. Improving the healthfulness of foods at local food pantries can improve the health and well-being of pantry clients.

- ☐ Strongly agree
☐ Agree
☐ Neither agree nor disagree
☐ Disagree
☐ Strongly disagree

17. Offering food pantry clients nutrition education can help clients eat a healthier diet.

- ☐ Strongly agree
☐ Agree
☐ Neither agree nor disagree
☐ Disagree
☐ Strongly disagree

Please rate your agreement with the next two statements about the **My Choice food pantry model**. In this model, food pantries allow people to walk through the aisles and choose items from different food categories such as vegetables, fruits, dairy, grains and protein.

18. Using the **My Choice model** in a food pantry can help pantry clients eat a healthier diet

- ☐ Strongly agree
☐ Agree
☐ Neither agree nor disagree
☐ Disagree
☐ Strongly disagree

19. Using the **My Choice model** in a food pantry can keep pantry clients from running out of resources to buy food.

- ☐ Strongly agree
☐ Agree
☐ Neither agree nor disagree
☐ Disagree
☐ Strongly disagree

INFORMATION ABOUT THIS FOOD PANTRY

Please answer the remaining questions in this survey thinking only about the food pantry where you currently volunteer or work.

Your Involvement

19. During the past 12 months, have you gone to any classes or workshops offered at this food pantry on nutrition topics?

- ☐ Yes
☐ No
☐ Don't know

20. During the past 12 months, have you gone to any classes or workshops offered at this food pantry on the topic of food safety?

- ☐ Yes
☐ No
☐ Don't know

21. During the past 12 months, have you gone to any classes or workshops offered at this food pantry on the topic of cultural competency? (*Cultural competency training helps people understand and interact positively with people of different cultures, generations, and socio-economic backgrounds.*)

- ☐ Yes

- ☐ No
☐ Don't Know

22. How comfortable are you talking with people from different cultures other than your own when you are at the food pantry?

- ☐ Very comfortable
☐ Comfortable
☐ Neither comfortable or uncomfortable
☐ Uncomfortable
☐ Very uncomfortable

23. When you are with clients at the pantry, how often do you talk to them about ways to stretch limited food dollars?

- ☐ Always
☐ Most of the time
☐ Sometimes
☐ Never
☐ I do not volunteer or work at the times when food is given out.

24. When you are with clients at the pantry, how often do you talk to them about nutrition?

- ☐ Always
☐ Most of the time
☐ Sometimes
☐ Never
☐ I do not volunteer or work at the times when food is given out.

25. How often do you talk to pantry clients about ways they can help their community become more food secure, such as getting involved with a local food council or helping out at the pantry?

- ☐ Always
☐ Most of the time
☐ Sometimes
☐ Never
☐ I do not volunteer or work at the times when food is given out.

Pantry Foods

26. Overall, how much of the food given out at this pantry do you consider to be "healthy"?

- ☐ All
☐ Most
☐ Some
☐ None
☐ Don't Know

27. Please describe what best helps this pantry to give out healthy foods.

28. Please describe what prevents the pantry from giving out healthy foods.

How Foods are Displayed

29. During the past 12 months, did the pantry make any changes in the way food was displayed for clients?

- ☐ Yes
☐ No **GO TO QUESTION 31**

30a. What changes were made in the way foods were displayed?

30b. Are you satisfied with these changes and their effects?

- ☐ Yes
☐ No
☐ Don't Know **GO TO QUESTION**

30c

Please explain your answer.

30c. What helped the pantry make these changes?

30d. What made it difficult for the pantry to make these changes?

How Food is Given Out

30. During the past 12 months, did the pantry make any changes in the way food was given out?

☐ Yes
☐ No **GO TO QUESTION 32**
☐ Don't Know **GO TO QUESTION**

32

31a. What changes were made in the way food was given out?

31b. Are you satisfied with these changes and their effects?

☐ Yes
☐ No
☐ Don't Know **GO TO QUESTION**

31c

Please explain your answer.

31c. What helped the pantry make these changes?

31d. What made it difficult to make these changes?

Nutrition Education

31. During the past 12 months, did this food pantry offer any in-person nutrition education, such as classes or food demonstrations, for pantry clients?

☐ Yes
☐ No
☐ Don't Know

32. During past 12 months, in addition to in-person nutrition education, did this food pantry regularly provide any nutrition education handouts or post nutrition information?

☐ Yes
☐ No
☐ Don't Know

FINAL QUESTIONS

33. During the past 12 months, have you gone to any meetings of a local Food Council?

☐ Yes **GO TO QUESTION 35**

☐ No

☐ Don't know if there is Food Council in my area **GO TO QUESTION 35**

34a. What prevented you from doing so?

34. During the past 12 months, have you attended any classes or workshops provided for the Food Council on any of the following topics? *(Place an X in all boxes that apply)*

☐ Community food systems

☐ Food security and insecurity

☐ Food pantries

☐ Food access and nutrition

☐ Cultural competency

36a. Why did you go outside of the pantry for classes or workshops?

35. If there is anything else you would like to tell us about how this food pantry is trying to help clients obtain a healthy diet, please describe this here.

36. If there is anything else you would like to tell us about how this food pantry is trying to help clients from running out of resources to obtain food, please describe this here.

Appendix D. Food Pantry Director Survey



Respondent ID: _____

Date: _____

Pantry Name: _____

Data Collector: _____

Food Pantry Director Questionnaire

INTRODUCTION

We are asking people in rural areas about the foods available in their communities. This survey is part of a project sponsored by the U.S. Department of Agriculture. It is being conducted by the (Department of XXX or XXX Extension at XXX University). We will use the answers that you provide to help create and strengthen local efforts to increase the amount and types of healthy foods available to low-income members of your community. We want to learn about you, your interest and involvement in how low-income members of your community obtain food. We also want to know your thoughts on how easy or hard it is to get healthy foods (specifically fruits, vegetables, low-fat dairy, whole grains, and lean protein foods) in your community.

Thank you for your honest and thoughtful responses. The survey will take about 30 minutes to complete. You do not have to take part in this research project. If you agree to take part you can stop at any time or choose to not answer any question. Your personal information will not be linked with your answers and all of the information you provide will be kept confidential. If you have any questions, please call XXX XXXX at xxxxxx at -xxx-xxxx.

BACKGROUND ON YOU

1. Would you describe your town or community as "rural"?
 - ☐ Yes
 - ☐ No
2. What is your age? _____ (Place an X in the box that best describes your age)
 - ☐ Under 18
 - ☐ 18 to 24
 - ☐ 25 to 34
 - ☐ 35 to 44
 - ☐ 45 to 54
 - ☐ 55 to 64
 - ☐ 65 to 74
 - ☐ Over 74
3. What is your sex? (Place an X in the box next to one response)
 - ☐ Male
 - ☐ Female
4. What is your ethnicity? (Place an X in the box next to one response)
 - ☐ Hispanic or Latino
 - ☐ Not Hispanic or Latino
5. What is your race? (Place an X in all boxes that apply.)
 - ☐ American Indian or Alaska Native
 - ☐ Asian
 - ☐ Black or African American
 - ☐ Native Hawaiian or other Pacific Islander
 - ☐ White
 - ☐ Other (please specify) _____

☐ Don't know

6. What is the highest grade or level of school you have completed? *(Place an X in the box next to one response)*

- ☐ Did not graduate high school
☐ High School graduate
☐ GED or equivalent
☐ Business trade school
☐ Some college, no degree
☐ Associate degree: Occupational, technical or vocational program
☐ Bachelor's degree (example: BA, AB, BS, BBA)
☐ Master's Degree (example: MA, MS, MEd, MBA, MPH)
☐ Professional School (example: MD, DDS, DVM, JD)
☐ Doctoral Degree (example: PhD, EdD)
☐ Other *(please specify)* _____
☐ Don't know

7. This question applies to your employment status: Are you currently...? *(Place an X in all boxes that apply)*

- ☐ Employed for wages or salary
☐ Self-employed
☐ Out of work and looking for work
☐ Out of work but not currently looking for work
☐ A homemaker
☐ A student
☐ Retired
☐ Unable to work
☐ Active military
☐ Non-active military
☐ A Veteran
☐ Other
(Please specify) _____

8. How would you describe your involvement at this food pantry?
- ☐ I am employed at this food pantry
☐ I am a volunteer at this food pantry

☐ Other

(Please specify) _____

9. When did you first start working at this food pantry in your current position?

- ☐ Less than one year ago
☐ 1 - 5 years ago
☐ More than 5 years ago

10. During the past 12 months, how many hours per month did you usually work at this food pantry?

- ☐ 5 hours or less
☐ 6 to 10 hours
☐ 11 to 15 hours
☐ 16 to 20 hours
☐ 21 to 30 hours
☐ 31 to 40 hours
☐ 41 or more hours

COMMUNITY PERCEPTIONS

11. How many people in your community do you think regularly run out of resources to buy food for themselves or their family?

- ☐ Many – more than 40%
☐ Some – 20 – 39%
☐ Few - 19% and below
☐ None
☐ Don't Know

Please rate your agreement with each of the following statements:

12. People in my community who run out of resources to buy food for themselves or their families usually eat a healthy diet.

- ☐ Strongly agree
☐ Agree
☐ Neither agree nor disagree
☐ Disagree
☐ Strongly disagree

13. People in my community would eat a better diet if healthy foods were easier to get.

- ☐ Strongly agree
☐ Agree

- ☐ Neither agree nor disagree
- ☐ Disagree
- ☐ Strongly disagree

14. Providing nutrition education can help people in my community who regularly run out of resources to buy food.

- ☐ Strongly agree
- ☐ Agree
- ☐ Neither agree nor disagree
- ☐ Disagree
- ☐ Strongly disagree

15. Providing information on how to stretch limited food budgets can help people in my community who regularly run out of resources to buy food.

- ☐ Strongly agree
- ☐ Agree
- ☐ Neither agree nor disagree
- ☐ Disagree
- ☐ Strongly disagree

16. Improving the healthfulness of foods available at local food pantries can improve the health and well-being of pantry clients.

- ☐ Strongly agree
- ☐ Agree
- ☐ Neither agree nor disagree
- ☐ Disagree
- ☐ Strongly disagree

17. Offering food pantry clients nutrition education can help clients eat a healthier diet.

- ☐ Strongly agree
- ☐ Agree
- ☐ Neither agree nor disagree
- ☐ Disagree
- ☐ Strongly disagree

Please rate your agreement with the next two statements about the **My Choice food pantry model**. In this model, food pantries allow people to walk through the aisles and choose

items from different food categories such as vegetables, fruits, dairy, grains and protein.

18. Using the **My Choice model** in a food pantry can help pantry clients eat a healthier diet.

- ☐ Strongly agree
- ☐ Agree
- ☐ Neither agree nor disagree
- ☐ Disagree
- ☐ Strongly disagree

19. Using the **My Choice model** in a food pantry can help keep pantry clients from running out of resources to buy food.

- ☐ Strongly agree
- ☐ Agree
- ☐ Neither agree nor disagree
- ☐ Disagree
- ☐ Strongly disagree

INFORMATION ABOUT THIS FOOD PANTRY

The next few sections of this survey are questions about your food pantry.

Food Sources and Types of Food Distributed

20. During the past 12 months, which of the following have been usual sources of food for your food pantry? (*Mark an X in all of the boxes that apply*)

- ☐ Food donations from individuals
- ☐ A food bank
- ☐ Grocery stores (food purchased or donated)
- ☐ Food donated by farmers or producers
- ☐ Federal government food assistance programs (*such as, the Emergency Food Assistance Program (TEFAP), the Food Distribution Program on Indian Reservations, or other programs providing federal commodities.*)
- ☐ Other

(Please specify) _____

21. During the past 12 months, which of the following sources of food provided the healthiest foods for your pantry? (Mark an X in only one box)

- ☐ Food donations from individuals
☐ A food bank
☐ A Supermarket (such as Food Lion, Wal-Mart, Sam's Club, HyVee, etc.) (food purchased or donated)
☐ Food donated by farmers or producers
☐ Federal government food assistance programs (such as, the Emergency Food Assistance Program (TEFAP), the Food Distribution Program on Indian Reservations, or other programs providing federal commodities.)
☐ Other
(Please specify) _____

22. Compared to a year ago, does this food pantry currently obtain and distribute more, less, or about the same amount of fruits and vegetables?

- ☐ More
☐ Less
☐ About the same amount **GO TO QUESTION 23**

22a. What do you think caused this change?

23. Compared to a year ago, does this food pantry obtain and distribute more, less, or about the same amount of whole grain foods?

- ☐ More
☐ Less
☐ About the same amount **GO TO QUESTION 24**

23a. What do you think caused this change?

24. Compared to a year ago, does this food pantry obtain and distribute more, less, or about the same amount of low-fat or non-fat dairy foods?

- ☐ More
☐ Less
☐ About the same amount **GO TO QUESTION 25**

23a. What do you think caused this change?

25. Compared to a year ago, does this food pantry obtain and distribute more, less, or about the same amount of low-fat protein foods (such as low-fat meats, fish, beans or nuts)?

- ☐ More
☐ Less
☐ About the same amount **GO TO QUESTION 26**

25a. What do you think caused this change?

26. Overall, what portion of the food items distributed at this pantry do you consider to be "healthy foods"?

- ☐ More than 3/4
☐ More than 1/2 but less than 3/4
☐ More than 1/4 but less than 1/2
☐ Some but less than 1/4
☐ None
☐ Don't Know

27. Please describe what best helps this pantry give out healthy foods.

-
-
-
28. Please describe what prevents the pantry from giving out healthy foods.
-

Refrigeration and Freezer Space

Please rate your agreement with the following statements about the food storage capacity of this food pantry.

29. The amount of refrigeration and freezer space available to this food pantry is adequate to serve the clients that visit this pantry.
- ☐ Strongly agree
☐ Agree
☐ Neither agree nor disagree
☐ Disagree
☐ Strongly disagree
30. The amount of refrigeration and freezer space available to this food pantry is adequate to store the amount of donated and purchased foods this pantry receives.
- ☐ Strongly agree
☐ Agree
☐ Neither agree nor disagree
☐ Disagree
☐ Strongly disagree
31. The amount of refrigeration and freezer space available to this food pantry would allow the pantry to serve more perishable foods than it currently receives.
- ☐ Strongly agree
☐ Agree
☐ Neither agree nor disagree
☐ Disagree
☐ Strongly disagree

How Foods are Displayed

32. During the past 12 months, did the pantry make changes in the way food was displayed for clients?

☐ Yes
☐ No **GO TO QUESTION 33**

32a. What changes were made in the way foods were displayed?

32b. Do you think these changes in the way foods were displayed were beneficial in any way?

☐ Yes
☐ No
☐ Don't Know **GO TO QUESTION**

32c

Please explain your answer.

32c. What helped the pantry make these changes?

32d. What made it difficult for the pantry to make these changes??

How Foods are Given Out

33. During the past 12 months, did the pantry make any changes in the way food was given out?

☐ Yes
☐ No **GO TO QUESTION 34**
☐ Don't Know **GO TO QUESTION**

34

33a. What changes were made in the way foods were given out?

33b. Do you think these changes were beneficial for the clients?

- ☐ Yes
☐ No
☐ Don't Know **GO TO QUESTION**

32c

Please explain your answer.

33c. What helped the pantry make these changes?

33d. What challenges did you face in making these changes?

Nutrition Education

34. During the past 12 months, did this food pantry offer any in-person nutrition education, such as short classes or food demonstrations, for pantry clients?

- ☐ Yes
☐ No **GO TO QUESTION 35**

34a. What organization(s) conducted these classes?

35. During past 12 months, in addition to in-person nutrition education, did this food pantry regularly provide any nutrition education handouts, brochures or post nutrition information?

- ☐ Yes
☐ No
☐ Don't Know

Classes for Pantry Volunteers

36. During the past 12 months, did this food pantry offer classes or workshops to your volunteers on any of the following topics? (Place an X in all boxes that apply)

- ☐ Nutrition
☐ Food Safety
☐ Cultural competency (*Cultural competency training helps people understand and interact positively with people of different cultures, generations, and socio-economic backgrounds.*)
☐ Other, please list

How Volunteers Communicate with Clients

37. How often do you see pantry volunteers and staff showing respect and friendliness in their interactions with pantry clients?

- ☐ Always
☐ Most of the time
☐ Sometimes
☐ Never

38. How often do you see pantry volunteers and staff listening to and talking with clients about their needs and preferences?

- ☐ Always
☐ Most of the time
☐ Sometimes
☐ Never

39. How often do you see pantry volunteers and staff talking to clients about nutrition?

- ☐ Always
☐ Most of the time
☐ Sometimes
☐ Never

40. How often do you see pantry volunteers and staff talking to clients about ways to stretch limited food dollars?

☐ Always
☐ Most of the time
☐ Sometimes
☐ Never

41. How often do your pantry volunteers and staff talk to clients about ways they can help their community become more food secure, such as getting involved with a local food council or helping out at the pantry?

☐ Always
☐ Most of the time
☐ Sometimes
☐ Never

**YOUR FEEDBACK ON VOICES FOR
FOOD TOOLKIT**

42. How useful was Extension's Voices for Food toolkit in helping you improve the operations at your food pantry?

☐ Very useful
☐ Somewhat useful
☐ Not at all useful **GO TO QUESTION 43**
☐ Did not read or use the Voices for Food toolkit **GO TO QUESTION 46**
☐ Don't Know **GO TO QUESTION 46**

43. Please describe what was most useful about the Voices for Food Toolkit.

44. Please describe what was least useful about the Voices for Food Toolkit.

45. How do you suggest that the Voices for Food Toolkit be expanded or changed to be more useful to your food pantry and to pantries in other communities?

46. Why did you not read or use the VFF toolkit?

**YOUR FEEDBACK ON HELP PROVIDED
BY VOICES FOR FOOD STAFF**

47. How useful was the help that Extension's Voices for Food staff provided to your pantry?

☐ Very useful
☐ Somewhat useful
☐ Not at all useful **GO TO QUESTION 48**
☐ Did not receive any help from Extension's Voices for Food staff **GO TO QUESTION 50**
☐ Don't know **GO TO QUESTION 50**

48. Please describe what was most useful about the help provided.

49. Please describe what was least useful about the help provided.

50. How do you suggest that the help from Extension be expanded or changed to be more useful to your food pantry and other food pantries?

FINAL QUESTIONS

51. During the past 12 months, have you gone to any meetings of a local Voices for Food Council?
- ☐ Yes, **GO TO QUESTION 52**
 - ☐ No **GO TO QUESTION 51a**
 - ☐ Don't know if there is Food Council in my area **GO TO QUESTION 52**

51a. What prevented you from doing so?

52. During the past 12 months, have you attended any classes or workshops provided for the Food Council on any of the following topics? (*Place an X in all boxes that apply*)
- ☐ Community food systems
 - ☐ Food security and insecurity
 - ☐ Food pantries
 - ☐ Food access and nutrition
 - ☐ Cultural competency

53. If there is anything else you would like to tell us about how this food pantry is trying to help clients obtain a healthy diet, please describe this here.

54. If there is anything else you would like to tell us about how this food pantry is trying to help prevent clients from running out of resources to obtain food, please describe this here.
